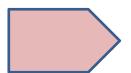
APPENDIX A HEALTHPLAN WASHINGTON STRATEGY 2 FINANCIAL ALIGNMENT DEMONOSTRATION GRAPHIC REVISED 4/17/13

LEGEND

MMI Plan

Accountable Entity – The state agency, local agency, MMI Plan, or other organization that has ultimate fiscal accountability for administrative and service costs and performance accountability for the quality of services delivered through the associated program/project delivery system.



Program/Project Delivery System – The key structural elements of the service delivery system employed by the Program/Project, including the package of covered benefits, the network of authorized direct service providers, and the model of care design used to plan, coordinate and manage interventions to meet the individualized needs of enrollees.

Authorizing Agency **State/Local Authorizing Agency** – The State or Local public agency that retains accountability for determining a beneficiary's financial eligibility for participation in an agency sponsored program, and for directly performing functional eligibility determinations and/or other selected duties required by the program's enabling legislation, federal and state laws and administrative regulations and rules, or CMS/State agreements.



Nucleus for Integrating Care Planning, Management and Coordination – The model of service delivery utilized to engage the individual enrollee and others of his or her choosing with an appropriate care team to identify the individual's health-related clinical and non-clinical needs, identify the individual's choices and preferences related to addressing the identified needs, and coordinate effective interventions using the array of covered medical, mental health, chemical dependency, and long-term services and supports, available community resources, and the contracted provider network.

In-person Beneficiary & Provider Interactions **Person-Centered Activities of the Individualized Care Team** – Key functions and interactions performed in partnership with and on behalf of the enrollee to promote the enrollee's opportunities and abilities to self-manage his or her individual health status and to actively participate as an informed decision-maker in matters relating to the selection and utilization of available covered benefits and community resources.

MMIP, CMS, HCA/DSHS, County **Project Joint Governance Team** – Executive level representatives of the MMI Plan and public agency partners and enrollee representatives responsible for monitoring the project's progress in achieving the targeted goals and making timely adjustments to the design as necessary.



Beneficiary and Personal Support System - The individual enrollee, and persons of his or her choosing including family members, caregivers, Individual Providers, etc.

HEALTHPATH WASHINGTON STRATEGY 2 FINANCIAL ALIGNMENT DEMONSTRATION

Seamless Care System That Integrates the Full Range of Services in a Payment Model that Effectively Aligns Incentives

